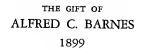
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THE PLACE OF HEALING IN THE MINISTRY OF THE CHURCH

by

REV. GEORGE F. MACLEOD, M.C., D.D. LEADER OF THE IONA COMMUNITY



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THE PLACE OF HEALING IN THE MINISTRY OF THE CHURCH

(The substance of this article formed Dr. MacLeod's Presidential Address to the New College Missionary Society. It attempts to focus the results of ten years' evolving experience by the Community in the realm of Healing.)

IF we are to get anywhere at all we must assume, without argument, certain points of agreement:—

- 1. Healing is a central obligation of the Church. Christ came neither to save souls nor to save bodies. He came to save men. Thus our whole ministry is one of healing: making crooked places straight in international issues, in class issues, and issues of sex. In Christ Jesus there is neither Jew nor Greek, bond nor free, male nor female. He is the At-one-ment. And as of the larger, so of the less. Christ makes crooked men straight. As in the body politic, so in the human body He makes straight, here the crooked mind and there the crooked body, and most often the crooked mind/body. He heals men.
- 2. The healing of bodies was the common experience of the early Church: well beyond the time of the apostles or the directly apostolic Church. One reason why, from the third century to the present date, we lift our hands in the Benediction was the necessity of the early injunction to "keep them up" at the end of the Communion Service, so great was the surge forward of the sick in the congregation to obtain the healing touch from hands so charged with charismatic power. "The laying on of hands" was as normal as that in the early Church. (Modern missionaries report a similar expectancy at the same moment in primitive parts of India.) Healing, then, in this specific sense, was as normal as the preaching of the Word. The frequent dual commission of the Gospels "to preach the Gospel and to heal the sick" had parallel responses. They were not only spoken of but practised together.
- 3. In a more orderly, or ecclesiastical, way this dual witness continued through the Mediaeval period.
- 4. This obedience dropped out from our Reformation witness, and increasingly, as the acids of modernity corroded the fullness of our faith.

Thus the healing of bodies though, at first sight, it may seem an incursion into the present climate of our Church, is really normal. It is not an ecstatic Church that adopts it. Rather to neglect it is to be subnormal.

Of the present situation one might say, in the first place, that the Roman branch of the Church, in this as in other regards, remarkably retains what might be called a pre-scientific power. They are, in this as in other regards, our "contemporary ancestors". Secondly, in so far as the Protestant witness has retained the practice, it has till recently become almost the prerogative of the sects: the Christian Scientists, the Spiritualists, the Pentecostalists, etc. In such hands it is always in danger of becoming a heresy—that is, its over-emphasis upsets the balance of the full Gospel. Thirdly, not only can we not leave this obedience in danger of such unbalance-leaving many of our people, it might be, in dubious hands—but our own preaching is truncated if we do not accept the full obedience. Now the whole Reformed Church is awakening to its obligations once more. Here then lies a great hope and a great danger. This article is concerned with a short note of our own developing experience; a glimpse at the nature of the danger and—finally—the kind of line we must pursue if the dangers are to be avoided and the possibilities of this recovered ministry conserved.

I.

OUR EXPERIENCE IN THE COMMUNITY

Our own developing experience is recorded to make plain that we speak from a positive point of view. "Pray for more light but follow the light you see" is a favourite principle of the Community. We make experiments before we see all the implications, conscious that thereby we may make mistakes, but convinced of the even greater mistake—which is to do nothing till you are certain. To be a "Seeker after Truth" surely implies sometimes going up the wrong avenue. Though we have occasionally gone wrong, experiment has only convinced us of the absolute necessity of going on. For ten years we have been developing the practice, and well remember our early experience of scorn from certain clergy and encouragement from doctors and psychologists! Now, with the whole Church awake to the obligation, it is sufficient to record our present practice. This is in two fields: intercession for the sick by name, and the laying on of hands.

(a) Intercession for the sick by name. Each Wednesday throughout the year there is a service either in Iona Abbey or Community House, Glasgow. On a recent Wednesday in Iona, nearly sixty names were sent to us for individual intercession. It is rare that the list falls below thirty. We are rigorous with the list. Each week a new application must be received for each name, else prayer becomes vague and irresponsible. The only

exception is in applications from abroad—for requests come regularly from Canada or Australia, South Africa or Switzerland, Sweden or Holland. Nor is intercession but once a week. In Iona the list is placed in the North Transept, and members of Community undertake daily intercession for one or other on the list, while, in winter-time, a group of "scattered intercessors" about twenty-five persons—undertake to continue daily in their own homes prayer for those whom we have remembered in the Wednesday congregation. Thus perhaps a thousand names a year are sent us. This, on the whole, is a matter for our confusion rather than for pride or complacency. As will emerge in this article, concern (or love) is the secret of healing. It is difficult to know how to express it at such anonymous distance. It is understandable to be asked, as sometimes, to "join" the Iona prayers with some group in action nearer the sick person. But it is positively surprising to get letters from ministers in Scotland asking for the prayers of our fellowship when apparently no praying group exists at the place of need. If such believe in healing prayer, why are they not involved as a congregation?

The corporate act of worship invariably includes also prayers of confession for our own inadequacies, of active acceptance of our forgiveness and therefore supplications of great expectancy. Prayer is also always made for doctors, nurses and all who, with us, are God's instruments of healing. Though with some hesitation. we continue to mention in prayer the ailment from which each is alleged to be suffering—as some assistance to those who seek to keep concentrated in Intercession: else the uniform recitation of some fifty Christian names, say, becomes in experience almost meaningless. We also instruct the praying congregation (who cannot know a tenth of those named) that, if the list begins to roll over them as a meaningless wave, it is best to "hold" to one name that has struck a chord for them, or even to pray for a sick person known to them but not on the list, than to be submerged in a pious vacuum. Despite all this impersonality, many letters are received each year of detailed "result" and great thankfulness.

(b) The Laying on of Hands. Actual practice of this is of late growth in Iona. For some years—for a week—Godfrey Mowatt had visited the Island and, despite a minimum of intimation, never less than forty persons came forward thus to receive a blessing. This frankly surprised us on an Island of holiday-makers where there is no resident doctor. Few who came forward gave any appearance of being physically ill. There must be, we concluded, a widespread consciousness of spiritual infirmity or acute anxiety—if such numbers came forward in a congregation of not more than two hundred souls. It was also borne in on us as odd that we made available this ministry to "one week" out

of the twelve weeks that the Community, with its attendant "youth camps", etc., were present on Iona. Against this background there has developed each Wednesday evening in the North Transept, as a separate occasion after the Intercession Service, the opportunity to receive the laying on of hands. Always the day before there is intimated an opportunity for any interested person to have personal interview lest the service be misunderstood. Always it is explained that, while some have special charismatic gifts (such as has Godfrey Mowatt), scripture assures us that an even "more excellent way" resides in the Faith of a loving congregation. All the ministrant claims—at these services—is that his hands are the focus of the prayerful concern of the congregation of Faith that is present.

Of this additional ministry all that can be recorded at present is that no such service has ever taken place without someone coming forward; that the aggregate number who do so throughout the summer about equals those who come forward in one week for one with an acknowledged gift of healing: and that letters have been received of appreciation. The present writer is inclined to believe that at least in some measure this occasion is taken advantage of more as an experience of absolution than of healing in its more recognised sense. Manifestly they are related and indeed might sometimes be considered identical. This idea is expanded later in this article.

Such then is some record of "what we are doing"; sufficient perhaps to make clear that any criticisms that we now attempt come from a group who are positive in their practice and by no means approach the issue from the outside.

П.

PRESENT DANGERS IN THE RECOVERY OF THIS MINISTRY.

The overriding danger might be summed up as a reversion to superstition and magic. This could be subdivided into three—the danger of reversion to the primitive; the danger of impersonality; the danger of separateness.

What, first, do we mean by a reversion to the primitive?

Look wider than our immediate subject. The Church in its history has passed through three climates: the pre-scientific age, the emergent scientific age, and now—the age in which we live—when we are dissatisfied with merely scientific conclusions. Both in theology and science men are casting about for a new synthesis. In the pre-scientific age (the primitive and mediaeval times of the Church) men were guided by intuition rather than by knowledge. They

were not earthed as we are earthed. Call that period "thesis". Then the emergent scientific age ran down from its early zest into rather cockeye and (for the spiritually minded) rather dismal conclusions. Call it "anti-thesis" of which our day sees the close. The nature of the "synthesis" becomes the problem.

Put this sequence in another way. In the intuitive period life was "dull, brutish and short". Grossly to paraphrase a familiar classical allusion, men lived in a rather damp and dark cave. They could look from this life's bleakness out towards the cave door, see the sunlight and occasional radiant figures passing across the doorway. There was a brighter, peopled world—an ideal world—cut off from the world of actuality. If God entered this world, He did so spasmodically and in magic.

The scientific period seemed at first to make a revolution in the possibilities of this cave existence. Science, so to say, so lightened up this immediate cave world that it seemed hardly necessary to look at the door to get brightness. Thus you get that—very temporary—period that had its climax at the end of the nineteenth and beginning of the twentieth century. Religion was at a discount. We made the most of the cave. Life here and now need not be dull, brutish and short. We put carpets in the cave, neon lighting and central heating. Life here and now was to be grand and sufficient. So brilliant was the world of one dimension that you could hardly see the doorway or the enticements of "another world". In the daring phrase of an American—God became "an oblong blur".

Then our own century—say, since 1914—began to raise its own question marks. How shall we put it in terms of our image? When folk were becoming complacent, without religion, in our transformed cave, odd things began to happen! The soft warm carpets began to ripple as in a haunted house. The brilliant lights began to fuse. There were even tremors in the "solid" walls. There were nasty indications that all was not well. There were "things that went bump in the night".

This is where we have got to. Most modern folk live still in the scientific mood: but they begin to get frightened. And the issue before our day (faced with these unexplained commotions) is are we going to go primitive again . . . going back to chant "demonic . . . demonic "about our climate or are we going to move forward to synthesis? Is it to be "back to God", to intuitive acceptances, a sort of panic escape to the so-called spiritual? Or is it to be forward to God: assuming that He who was the God of the age of Faith is also the God who allowed the scientific upsurge and allowed its declension in order that we might come to an age of even greater Faith?

The application of all this to Divine Healing is, we hope,

obvious. It is large areas of science that are discovering "Glory" again. Said a lecturer in Biology "what worries me is that I find a greater sense of awe and expectancy among fellow scientists than among the clergy I meet". The relation of Spirit to Matter is being more excitingly canvassed in laboratories than in theological clubs. Julian Huxley, in his conclusion to a book on Biology, writes "we come to a monistic conclusion: one fundamental substance composed of material and what—for want of a better name—we must call mental properties". In agriculture, the fight against soil erosion leads to such strange phrases as "living soil" and "dynamic agriculture".

And we must not forget that Jesus said, "I am Bread".

In physics, when they search about for a description of the atom, they speak of "Light/Energy". And we must not forget that Jesus said, "I am Life and I am Light". It is in tune with all this that Psycho-somatic (soul/body) medicine is the new department of medical study; so that a doctor recently said to the writer, "Sixty per cent of my patients are really looking for the confessional".

It is in this sort of setting that we have to ask is the Church's recovery of Divine Healing going to take the laborious road of "forward to God" or is it to be an escape mechanism back to primitive reversion? Are we going to move forward to a synthesis between the thesis or the ancient intuitions and the antithesis of "sufficient" science? Or are we going to burrow back into uncritical intuitions—which can no longer serve us even to the extent that they served our fathers?

The whole issue can be referred as much to the debate about Evangelism, Billy Graham and all that, as about Divine Healing. But confine the issue here to Divine Healing. There are times when the indications are that it is a reversion. Too many claims are made that upset not the materialists in the medical profession—but the most sympathetic of doctors. One could wish either that we made no claims at all or paid a little more respect to what science reckons to be a responsible claim: that is, that we simply perform our obedience—to heal the sick, and a little more obviously rejoice in all healing everywhere as of God.

Just as there is no such thing as "Christian Truth" over against Truth, so there is no such thing as Christian Healing over against Healing. All healing is of God and the man who walks again after penicillin is just as much divinely healed as a man who walks again after a service of the laying on of hands. We have no Divine Repository where "religious" things happen over against a hospital where so-called merely physical things happen. Consider an extension of this—

There seems to be a power in the world (it is sometimes

apparent in the laying on of hands) which cannot be exclusively claimed for men of Faith. It is, nonetheless, extended to men of Faith at times. Some call it "Odic force". In its least intense form it "accounts" for what we call "strong personalities". We just "know they are in the room" or we "like to be near them". The explanation is neither here nor there, but it seems to be connected with vibrations that emanate from them: electric currents that we cannot see but which nonetheless affect us. Such is the odic force at its most superficial. Spiritual Healers, it seems, have this force to a marked degree which becomes focussed in their hands. (Is it not also present in the hands of some nurses whom we call "born nurses"?) Now, by all means let us put on a dogcollar round the upper reaches of this vibrant emanation. But do not attribute the healing to the dogcollar and leave out the odic force!

An extensive quotation is here justified, because it is scientific, can be verified, and makes the point.*

This is Mr. Eeman's description of a cure in which the only instrument is a copper wire held in the right hand of the scientist and the left hand of the patient. "A man twisted in shape by acute sciatica finds, after a few minutes in the relaxation circuit, that he is beginning to feel circulation and warmth in the affected parts and that his muscles are relaxing spontaneously and progressively. Suddenly unbearable pains attack him. He turns pale, sweats profusely and literally writhes in agony. Moved by his screams, I break the circuit and calm returns. I inform him that experience convinces me that, if he will but have the courage to face pain in the circuit until it stops of its own accord, he will be amply rewarded. He says, 'All right, go on, I'll stand it'. I close the circuit again and, almost at once, agony! A quarter of an hour, possibly more, and suddenly peace and relaxation. The patient rests and gradually recovers colour. His clothes are wet with perspiration. He rises, tests his limbs in various attitudes that have been impossible for weeks, finds no pain, and leaves the room almost straight. After half a dozen treatments in the circuit, this chronic sufferer from sciatica becomes a swimming enthusiast at the age of fifty." It is worth adding that, if the patient is left handed normally, it is of great importance to reverse hands! Also that, as copper wires are unwieldy things, in these experiments, they now use silk thread.

What is the point of this illustration? (a) Somewhere here is odic force—whatever else is present. (b) The healer's power does not, in his own estimation, stem from any Christian belief. (c) It is, nonetheless, divine healing. (d) Something similar can

^{*} From Co-operative Healing by L. E. Eeman. The sub-title of the book is The Curative Properties of Human Radiations.

happen also at Divine Healing Services. (e) Both in consulting rooms and in Healing Services it does not always happen.

Further, if we are going to be scientific, we must admit that there are well-authenticated cases of seemingly fatal cases of cancer which—almost overnight—have taken a completely different course; without prayer or the laying on of hands being used at all.

All that we argue here is that we must keep our peculiar contribution to divine healing within the area of the scientific. Admit the miraculous by all means—what doctor does not in the ordinary course of his work?—but do not confine its working to the ecclesiastical department of God's mercies. We must, that is, be careful not unconsciously to revert to blind pre-scientific intuitive claims. The Church is not the miraculous element in a natural world. The Church is the interpreter of what is in any event a miraculous world.

The second danger we must guard against is that of impersonality.

It is related to the first. It is the danger of "just going through the motions", to use an army phrase for meaningless drill, and not seeing this gift in the context of the Church. Christ is the Healer and He manifests Himself in Love. And the fulfilments of Love imply a costly and demanding obedience.

When in South Africa, the writer gave four consecutive addresses to the same constituency on four successive nights, all similarly advertised. To his address on Parish Mission, sixty came: to that on Political Concern by the Christian, fifty came: to that on the Devotional Life, Personal and Corporate, forty came. To that on Divine Healing, three hundred and forty turned up! The meaning? Such is the "oblong blur" that personal faith has become for so many, even church members, and such are the gathering fears that God has deserted this increasingly demonic world, that there begins to be a pathetic rush to any "evidence" that God directly intervenes. As if to say "The colour question is too complex. . . . one has to think and one might have to feel guilty . . . but, for divine healing, we need only come and pray in a deep hush and perhaps we will be convinced again of a living God."

Again, one week in Iona we had with us both a spiritual healer and a Christian psychologist. They were not antipathetic. The healer attended the other's lectures, the psychologist asked prayers for his desperate cases. But one could not fail to note the relative cost to each of his ministry. While the "healer" spent his day in holiday save for the evening service, the psychologist was daily despatching some twelve letters to his patients lest, in his absence, they went back on their half completed treatment. And to write twelve letters daily to the same people each day must indeed be

to invade the freedom of one's own holiday. Surely God, as He is revealed by Jesus Christ, is not likely to honour more the man with special gifts, suddenly exerted at the evening service, than the man who so costingly and daily "prayed" for his twelve bad cases. This is not to deny that God honours both ministries. It is simply a warning against giving primacy to an almost "impersonal" ministry, which might almost end in a reversion to a magical interpretation.

The twelfth chapter of the First Epistle to the Corinthians is here instructive in a rather surprising sense. For what place does St. Paul give to those with the direct gift of healing? "First come Apostles, secondly Prophets, thirdly Teachers (Dr. Moffat's Translation), then workers of miracles, then 'Healers, helpers, administrators' and speakers in 'tongues' and their interpreters. Are all apostles? Are all prophets? Are all teachers? Are all endowed with gifts of healing? Are all able to speak and interpret tongues? Set your heart on the higher talents. And yet I shall go on to show you a still higher path . . . "and the epistle moves into the great thirteenth chapter with its portrayal of the marks of Love.

This sequence seems important. At a time when we are in danger of a reversion to giving primacy to this man or that with special gifts, as if we were getting in touch again with "real" ministries of power, it is important to remember St. Paul's order, where those with these gifts are bracketed with, shall we say, full-time secretaries of permanent Church committees ("administrators"). It is not that there are no such ministries: but there is clear declaration of their secondary place. And let us hasten to add that those with these gifts are always the first to accept St. Paul's order. What we warn against is a false importance creeping in with the new recovery of our obligation to heal.

Related to this, and still within the danger of "impersonality", is the importance of the thirteenth chapter. More important than any of these ministries, taken by themselves, is the ministry of love. "A more excellent path" than any one of them is the costly practice of the Christian Fellowship, the ongoing work of the Christian congregation in suffering long and being kind, in envying not, in thinking no evil, in rejoicing in the truth. It is this love that never fails, this corporate ministry that is the real healing power: superior to preaching, prophecy, miracles and healers. This is to anticipate the closing section of this article. It is sufficient to say here that a minister with an undoubted gift of healing in Glasgow to-day, nonetheless, gladly reports that he has more frequent results from the activities of his praying congregation than from the apparently more spectacular occasions when he lays on hands. So much then for the danger of a reversion to "impersonality",

as if here were a ministry that operates by itself or reposes in rare and special gifts.

Finally, the danger of "Separateness"

What we mean here is the present tendency to "concentrate" on Divine Healing as if it can be an isolated recovery, sealed off from social concern. It comes, for instance, somewhere near to blasphemy that we should merely pray for "Margaret, suffering from T.B.", when we know quite well this illness was contracted in a damp room in the slums of Glasgow. This is not to say that we dare not pray for Margaret till all slums have been cleared. For God is a Father and not just an indifferent guardian of righteousness. He is a God of mercy who saves and heals, while we are yet sinners. But it is to say that it is near blasphemy merely to pray for her individually when there is a known cause which we should be tackling at the same time. Just as it is near blasphemy merely to pray that Jean, Mary and John should be released from a fear neurosis—due to the present atmosphere of war preparation—without concerning ourselves about the international issues that make for war.

In summary, if the Church should ever come to say, "We have tried missions and little comes of them: we have concerned ourselves with politics but only got into a mess: we have read psychology but it is all so complex: let us 'go to': here is a straight run-through: we will become very consecrated, very 'spiritual': we will escape the Cross of History, and embrace the offer of individual resurrections": then we will have succumbed to a reversion. Nor will we be rewarded. Having fasted, having bowed our heads as bulrushes, God in fact will not listen, nor will He hear. "For is not this the fact that He has chosen (Isaiah 58)... to feed the hungry and clothe the naked and break every yoke." "Then shalt thou call and the Lord shall answer."

As our world grows more difficult—by reason of our scientific breakaway from God—there is a real danger of this panic reversion.

Such then are the dangers to be avoided.

III.

FINALLY, WHAT ARE THE LINES OF DEVELOPMENT BY WHICH THE GREAT POSSIBILITIES OF THIS RECOVERED MINISTRY MAY BE CONSERVED?

They have been presenting themselves while we have sketched the dangers. Briefly, the overriding obligation seems to be that we must not stand back from this ministry of prayer and the laying on of hands, but must seek its fulfilment through the life and obedience of the whole congregation.

Within this principle here are some obvious pointers.

We must not leave it to "the little group". Just as evangelism cannot be left to the little group, nor foreign mission concern, so neither can this ministry of healing. We commend those congregations—to be found in the Community and its Associate Ministers—who make corporate prayer, round the Communion Table, immediately after morning service. It may be that, at first, only a small group will stay but it remains open to all and is seen as a congregational obligation. We must also guard against the idea that it is only the "far ben" spiritually who can undertake it. Of course, it requires consecrated people: but no less and no more consecrated than those whose witness is in the political or any other sphere.

We must contemporaneously try to be as concerned with "Margaret's" house as with the T.B. that was contracted there: with furthering "War on Want" as much as with the neuroses that are developing through fear of war. St. Paul speaks of a diversity of ministry—which by no means only applies to the clergy. It is obvious that all in the congregation cannot be concerned with all activities. Differing groups will in fact concentrate on different aspects of obedience. But all aspects should hold the respect of all in the congregation and the varying interests should constantly interact.

By the same token, our concern for the sick should be a total concern. The underlying resentments, disappointments or fears that aggravate—or sometimes almost cause—physical ailments should concern us as much as the outward symptom. And we must meet the needs of some sick folk corporately in the life of the Fellowship that is the congregation. For it is the congregation that is the "Body of Christ," and Christ heals bodies through the touch and concern of this His own mysterious chosen instrument.

It is related to this that the present writer (presently) inclines to the view that we should recover the ministry of the laying on of hands in its more strictly sacramental sense. To be sure, if someone with a manifest gift in the congregation (be he man or woman) is available, and lives within the life of the congregation understanding the emphases here made, such person should obviously be used. But, failing such, we should consider the recovery of this ministry as a normal function of the parish minister, provided only he be not embarrassed. After all, we are set apart by "the laying on of hands", and he would be bold who claimed an essential difference between the two rites. In both is a person cleansed: in both is a person set apart to a more consecrated life. In Wyclif's New Testament the invariable word for "salva-

tion" is "health". Further, ministers are set apart "to preach the Gospel and to heal the sick". Would anyone claim that the Grace imparted in Ordination is partial for preaching only? And if our setting apart to "administer the Sacraments" has strictly reference to the two scriptural sacraments, are we not also set apart "to bless the people"? Must the hands of blessing always be raised? Cannot they come down in a ministry of "touch" which anyway we employ when almost involuntarily we lay a sympathetic hand on the shoulder of someone in deep sorrow? But in all this—let us repeat—we are simply the hands of the believing Fellowship (as indeed we are in the Sacrament of Holy Communion) and must guard against unscriptural "sacerdotal" claims. Nor need we doubt that—within this setting—there may be developed by some hidden charismatic gifts of great value to the Fellowship.

If the more cautious say that in this the present writer goes too quickly, let them also reckon with the consequences of us going too slowly. Reference has been made earlier to the surprising number who begin to "want" this ministry. If they do not receive it—within the balanced setting and corporate responsibility we have been at pains to emphasise—they will go elsewhere, to the isolated service (where there is no such follow-up as a congregational setting would secure), and sometimes into the hands of the esoteric or irresponsible.

There is a final and still related point: come to from experience. Much sickness is related to sin: peculiarly those areas of sickness where the Church's minister is perhaps most needed, and could be most potent. We dare not recover scriptural techniques of healing without investigating at the same time what may be our obligation to recover equally scriptural techniques of forgiveness. So many of our laity imagine that at the Reformation we did away with all techniques to assure folk of their forgiveness. We did not do so, of course. We went back to the strictly scriptural practice of confession to the congregation. This was finally focussed in confession to the Kirk Session. This in turn, for good rather than bad reasons, has fallen into disquietude. In the result we are left simply with burdened souls! But these remain our responsibility. We do not evade the responsibility by simply doing nothing. There is a terrifying text in scripture: "Whosoever sins ye remit they are remitted, whosoever sins ye retain they are retained." Once more it is a corporate responsibility: the warning is in the plural form. It is not enough to make the text a "talking point" in reference to the techniques of other denominations. We are, in fact, by our caution, and our declension from full

Reformed practice, retaining sins in many burdened souls. How many know that of the hospital beds occupied in Britain to-day some forty-three per cent are in mental homes?*

What is even more concerning is that, in the opinion of the Superintendent of one of our largest asylums, himself an elder of the Church, well over fifty per cent could "leave to-morrow" if we could convince them of their "forgiveness". There is a challenge to us, by reason of our failure to perform a complete ministry. But even that can be called a pathological area of our responsibility. With them only, the half has not been told. For how many of the "normal" members of our congregations are not semi-sick because of an increasing and sometimes unconscious weight of unforgiven sin? How much indeed does not each of us fail to achieve the really free life because of a lurking consciousness that we are not fully forgiven? May the reason be that we have ridden too lightly to scriptural injunctions as to ways whereby we may feel released from the burden of our sins?

This aspect of our larger concern can well afford to be the subject of another article in a subsequent *Coracle*. But we can close with this assurance. What appears to be needed is not a slavish return to older catholic practice, heedless of the tremendous truth recovered by the Reformation. That, too, would be but a reversion. If, in this regard, the Roman approach was thesis, then our present doleful plight might be termed "anti-thesis". Here, too, there is a synthesis to be worked out of profound significance in any recovery of our ministry of healing.

Till it is worked out let no one suppose that "nothing happens" while we prevaricate. Those burdened souls that are our responsibility will not wait for us. They will go, as they do, in desperation to psychologists. Nor do all of them know how carefully to choose their "man". It is in recent weeks that the writer dealt with a case of marital discord. Uninstructed and unaided by their Church, both had gone in desperation to psychologists. And what had been advised to each of them, as cure for their souls? What but that each should go and commit adultery. We cannot afford to do nothing. That both, in fact, refused to take this advice hardly ends the matter. Nor the fact that good psychologists would never so suggest. We must quickly recover, with doctors and psychologists, our special place in the ministry of healing.

^{*} This figure may not be quite as alarming as it appears. In the nature of the case, those in mental homes are there for much longer than the average patient in ordinary hospitals. But, when all account is taken, it is alarming enough.

